



**New Jersey Office of the Attorney General**

Division of Consumer Affairs

124 Halsey Street,

Newark, New Jersey 07101

**New Jersey High School Consumer Bowl  
Registration Form  
Please return this form by October 18, 2004**

Name of school \_\_\_\_\_

Street address \_\_\_\_\_

ZIP code

County \_\_\_\_\_ E-mail address \_\_\_\_\_

Mailing address (if different) \_\_\_\_\_

School telephone number \_\_\_\_\_ School fax number \_\_\_\_\_  
(include area code) (include area code)

**Teacher/Advisor Information**

Name \_\_\_\_\_ Telephone number \_\_\_\_\_  
(include area code)

Fax number \_\_\_\_\_ E-mail address \_\_\_\_\_  
(include area code)

**Please submit any dates, from November through May, when your school would be unavailable to compete because of school, state or national testing days; vacation days; holidays; religious holidays or other competitions. Thank you for your assistance.**

**Return this form and a list of your unavailable dates to:**  
**Unavailable Dates**

_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

**Loretta Creggett,  
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New Jersey Division of Consumer Affairs  
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